



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7511

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER 10/743,183 | FILING DATE 12/22/2003 RULE | CLASS 426 | GROUP ART UNIT 1761 | ATTORNEY DOCKET NO. AR-1-gw-mv |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

APPLICANTS

Andrea Ruston, Hicksville, NY;

** CONTINUING DATA *****

None 10/14/05

** FOREIGN APPLICATIONS *****

None from 10/14/05

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 04/01/2004

| Foreign Priority claimed | <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
|---------------------------------|---|----------|---------|--------|-------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY | DRAWING | CLAIMS | CLAIMS |
| Verified and Acknowledged | Examiner's Signature _____ Initials _____ | NY | 8 | 9 | 1 |

ADDRESS

Michael I. Kroll
 171 Stillwell Lane
 Syosset , NY
 11791

TITLE

Tie down reinforced infusion bag

| | | |
|-------------------------------|---|---|
| FILING FEE RECEIVED 385 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-------------------------------|---|---|